

Kluppelberg v. Burge, et al.
Case No. 13 CV 3963
Our File No. 13-3050

EXHIBIT 4

William Kelly Employee Form



City of Chicago Employee Change of Address Form

Department POLICE Bureau Area 3 V/C
Name William D Kelly
Position title DETECTIVE
Social Security number REDACTION

I understand and acknowledge that as a condition of employment with the City of Chicago I must be an actual resident of the City of Chicago.

Old Address REDACTION Zip Code REDACTION
New Address REDACTION Zip Code REDACTION
Effective Date 5 Jan 88
New Phone Number REDACTION

I understand that the falsification of this statement of address shall constitute grounds for discharge from the City Service.

I understand and acknowledge that I must report any change of address immediately to my department head and to the Department of Personnel and that failure to provide such notification shall constitute grounds for discharge from the City Service.

By signing this residency affidavit, I acknowledge and represent that I have fully read and understand **both the front and reverse sides** of this residency affidavit, and further certify that the information which I have provided herein is true and correct.

**CONFIDENTIAL-SUBJECT
TO PROTECTIVE ORDER
ENTERED IN 13 CV 3963**

Signed William D Kelly

Date 7 Jan 88

Complete and sign two copies.
First copy to departmental file.
Second copy to Department of Personnel.